

# BOOK REVIEWS

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## Vascular Emergencies

Alain Branchereau and Michael Jacobs; Elmsford, NY; 2003; Futura; 310 pages; \$150.

This book is the subject of a 2003 European Vascular Course, Vascular Emergencies. The main impetus for choosing this subject is that approximately 40% of vascular surgical practices are determined by vascular emergencies. The book's intended audience is surgeons who primarily care for vascular problems and who are thus constantly exposed to all of the vascular emergencies described in this book. This book is quite useful for vascular surgeons in practice who desire a brief review of emergent vascular problems. It is particularly useful to vascular and general surgery residents who desire brief yet thorough descriptions of vascular emergencies.

The book is divided into 31 chapters with authors from all of the major vascular programs throughout Europe. The first chapter is unique in its discussion of the important bioethical concerns of vascular emergencies. The remaining 30 chapters are roughly divided into five anatomic areas. Chapters 2 through 4 focus on acute dilemmas in carotid artery disorders. This section covers unusual areas such as blunt trauma of the carotid artery and stab wounds to the base of the neck. Chapters 5 through 12 discuss vascular emergencies involving the abdominal and thoracic aorta. The discussion of acute aortic pathology includes occlusion of the aorta as well as rupture. Treatment of acute aortic pathology by standard open surgical techniques as well as up-to-date information concerning the role of endovascular treatment is presented and is quite detailed. The chapter discussing aortic dissection provides new insight into the evolving role of the use of surgery and endovascular techniques in treating type B aortic dissection, which has traditionally been treated by medical means. The aortic chapters also included treatment of vascular emergencies due to traumatic rupture and injury occurring during laparoscopic surgery. The third major group of chapters covers vascular emergencies of the renal and splanchnic vascular systems. Quite interestingly, a chapter is included in this group discussing the abdominal compartment syndrome. The fourth group of chapters discusses vascular emergencies of the venous system, including iliofemoral veins, subclavian-axillary veins, and acute pathology of the vena cava. The remaining 11 chapters of the book (the fifth group of chapters) discuss vascular emergencies of the of the upper and lower extremities. These chapters are quite inclusive and cover thromboembolism, traumatic injury, and complications of arteriovenous access for dialysis and the treatment of acute graft occlusion. The last chapter discusses acute problems of the diabetic foot, which comprise a large proportion of most vascular practices' cases.

The book is well organized and quite comprehensive. The chapter discussing the bioethics of vascular emergencies provides the reader insight into the bioethical issues faced every day in treating vascular emergencies. With two exceptions, the chapters are extremely well written and briefly summarize each major subject area, the pathophysiology, and all alternatives to treatment. The descriptions for treating each of the acute vascular emergencies present medical therapy, surgical therapy, and endovascular therapy in excellent detail. The European and North American literature cited in the chapters provides the reader with a broad background of supporting data. With a few exceptions, the tables are clearly presented and the figures used are quite good.

There are a few areas that provide some difficulty to the reader. Although informative, most of the radiographs (computed tomography scans, angiograms) do not have arrows to precisely identify areas of interest to the novice reader. Chapter 14, "Acute Intestinal Ischemia," is extremely brief, is not up-to-date, and could use

angiographic examples of the acute pathology described. Chapter 24, endovascular treatment of blunt injury of the limbs, is quite modest compared with the remaining chapters. Moreover, some of the information is not quite accurate. For example, in the first paragraph the authors state that the literature only contains case reports of vascular blunt injuries, but there is a considerable literature in North America describing significant amounts of blunt injury causing vascular injury. The table in Chapter 24 is poorly presented. The table title is confused and the descriptors are placed in the wrong categories. For example, the entry on the last line of the table, thrombolysis, would not be used to treat a femoral arterial pseudoaneurysm, whereas thrombin injection would be correct. These weaknesses could be easily corrected if a new edition is planned in the future.

One cannot really compare *Vascular Emergencies* with any other text, as it is unequaled in its scope. I would recommend this text to all young surgeons in training and, in particular, surgeons beginning their training in vascular surgery. I would also recommend the text for surgeons who do not routinely treat all of the vascular emergencies with all of the modalities described in this text to increase their awareness of these issues and thus to improve care of these challenging patients.

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## Complications in vascular and endovascular surgery, part II

Alain Branchereau and Michael Jacobs; Armonk, NY, 2002; Futura; 329 pages; \$136.95.

This book is the second part of a two-part book entitled, *Complications in Vascular and Endovascular Surgery*. The book is edited by Alain Branchereau, MD University Hospital, Marseille, France, and Michael Jacobs, MD University Hospital, Maastricht, The Netherlands. Part II includes 30 chapters and covers a wide variety of topics. More than 100 authors and coauthors have contributed to these chapters. The vast majority of the contributors are European, with only two chapters written by U.S. authors. The topics in Part II range from groin wound problems, compartment syndrome, and multiple organ failure to complications following open and endovascular aortic surgery and complications of open and endovascular renal and lower limb revascularizations. Complications related to hypercoagulability and cerebrovascular revascularization, venous surgery, kidney transplantation, and vascular access, along with aortic arch and thoracic aortic aneurysms and dissections, were covered in Part I of this book and are not included in this review.

Part II is a welcome contribution to the vascular surgery literature. Its strength stems from its unique focus on complications, especially with respect to their incidence, prevention, and management. Overall, the chapters are very well written and easy to read. They typically include an updated review of the literature, supported by tables, figures, data, and well selected landmark and recent references. Particularly well written are the chapters covering ischemia reperfusion and compartment syndrome, colonic ischemia after aortic surgery, spinal cord ischemia after thoracoabdominal aortic repair, the overview of complications following endovascular abdominal aortic aneurysm repair, the concept of endotension, and renal artery surgical reconstruction.